PTO/SB/22 (08-03)

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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) Docket No. (Optional) 8733.565.00 | | | | | |
|---|--|-------------------------|----------|-------------------------|----------------|
| In re Application of Yun-Ho Jung | | | | | |
| | Application Number 10/025,907 | | | Filed December 26, 2001 | |
| · | For: APPARATUS AND METHOD OF CRYSTALLIZING AMORPHOUS SILICON | | | | |
| | Art Unit | 1762 | Exam | iner | M. Padgett |
| This is a request under the provisions identified application. | | | | | |
| The requested extension and approp | riate non-small- | entity fee are as follo | ws (ch | eck time per | riod desired): |
| X One month (37 CFR 1.17(a)(1)) | | | | \$ | 110.00 |
| Two months (37 CFR 1.17(a)(2)) \$ | | | | | |
| Three months (37 CFR 1.17(a)(3)) \$ | | | | | |
| Four months (37 CFR 1.17(a)(4)) | | | | \$ | |
| Five months (37 CFR 1.17(a)(5)) | | | | \$ | |
| Applicant claims small entity s reduced by one-half, and the r X A check in the amount of the f | esulting fee is: | | , the fe | e amount sh | nown above is |
| Payment by credit card. Form PTO-2038 is attached. | | | | | |
| The Director has already been authorized to charge fees in this application to a Deposit Account. | | | | | |
| The Director is hereby authorize overpayment, to Deposit Acco | unt Number | | e requir | ed, or credi | t any |
| I have enclosed a duplicate copy of this sheet. I am the applicant/inventor. | | | | | |
| applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | | |
| attorney or agent of record. Registration Number | | | | | |
| attorney or agent under 37 CFR 1.34(a). | | | | | |
| Registration number if acting under 37 CFR 1.34(a) 40;106 | | | | | |
| August 11, 2004 Date | | & | n | \$jgnature | ws |
| 202-496-7537 Tolophone Number | | | Tunn | Eric J. Nus | |
| Telephone Number Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below | | | | | |
| X Total of 1 | forms are subm | nitted | | | |

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